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U.S. DEPARTMENT OF COMMERCE  
PATENT AND TRADEMARK OFFICE

**REQUEST FOR CONTINUED EXAMINATION (RCE)**  
**TRANSMITTAL FORM (37 C.F.R. § 1.114)**

DOCKET NO. 12406/83	APPLICATION SERIAL NO. 10/692,052	EXAMINER Sunit PANDYA	ART UNIT 3714
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INVENTOR: **B. KILBY, et al.**

Address to:  
**Mail Stop RCE**  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

Date: April 7, 2008 Reg. No. 47,893

Signature:   
Andrew L. Reibman

This is a **Request for Continued Examination** under 37 C.F.R. § 1.114 (RCE) of pending application Serial No. 10/692,052, filed on October 22, 2003, entitled **METHOD AND SYSTEM FOR IMPLEMENTING A GAME**.

The following constitute the submission **required** by 37 C.F.R. § 1.114(a) and is attached:

- ☒ **X** Amendment  
☐ Information Disclosure Statement and Form PTO-1449  
☐ Drawing Changes  
☐ Other Submission: \_\_\_\_\_

1. The filing fee for this RCE and the required amendment/submission is calculated below. The fee below is calculated based on the status of the claims after the entry of the attached amendment/submission. The fee for any new additional claims is included with this RCE, the fee for previously entered additional claims having already been paid.

	CLAIMS REMAINING AFTER AMENDMENT	MINUS	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT NUMBER EXTRA*	RATE (\$) PER CLAIM	FEE (\$)
BASIC FEE						810.00
TOTAL CLAIMS	30	-	30	0	50.00	0.00
INDEPENDENT CLAIMS	2	-	8	0	210.00	0.00
MULTIPLE DEPENDENT CLAIM					370.00	
				Number extra must be zero or larger	TOTAL	810.00
If Applicant is a small entity under 37 C.F.R. §§ 1.9 and 1.27, then divide total fee by 2, and enter amount here.					SMALL ENTITY TOTAL	

2. Please charge the required RCE submission and additional claims filing fee of **\$810.00** to the deposit account of **Kenyon & Kenyon LLP**, deposit account number **11-0600**.

04/11/2008 MBELETE1 00000031 110600 10692052

01 FC:1801 810.00 DA  
NY01 1506462

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02 FC:1255 2230.00 DA

3. Please pay the required five-month extension of time of \$2,230 to the deposit account of **Kenyon & Kenyon LLP**, deposit account number **11-0600**.
4. The Commissioner is hereby authorized to charge payment of the fees, including any additional fees required, associated with this communication or arising during the pendency of this application, or to credit any overpayment, to the deposit account of **Kenyon & Kenyon LLP**, deposit account number **11-0600**.
5. A duplicate copy of this transmittal form is enclosed.

Dated: April 7, 2008

Respectfully submitted,

By: 

Andrew L. Reibman  
Reg. No. 47,893

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